

Date Received: 4/28/10 1st

5PM 5/1/10

Route File: Enforcement: Hawaii 5/29

Engineering: 5/25/10 DA

AGS 5/25/10

(JBD) Monitoring: J

DISCHARGE MONITORING REPORT (DMR) EVALUATION

Waimanalo Gulch

Permit No.: H1 1250A533 Permittee: Sanitary Landfill

Date of Report: 4/29/09 Type of Report: DMR

(3/21/09 to 3/1/10)

ITEM	EVALUATION	RECOMMENDATION
Effluent Limit	No Discharge* (see cover letter for explanation).	
Monitoring		
Progress		
Other		

CWB-6/99 (dmrfmt)

10B536

APR 28 2010



April 29, 2010

WASTE MANAGEMENT

92-460 Farrington Hwy.
Kapolei, HI 96707
(808) 668-2985
(808) 668-1366 Fax

Director of Health
Clean Water Branch
Environmental Management Division
State Department of Health
P.O. Box 3378
Honolulu, HI 96801-3378

2010 APR 28 1:20PM

Attention: Ms. Kris Poentis, Engineering Section

Subject: Annual Discharge Monitoring Report and Storm Water Results, Waimanalo Gulch Sanitary Landfill, Kapolei, Oahu, Hawaii, File No. HI R50A533

Dear Ms. Poentis:

On behalf of the City & County of Honolulu, Waste Management of Hawaii (WMH) submits annual storm water monitoring results, including the Discharge Monitoring Report (DMR), for the Waimanalo Gulch Sanitary Landfill for the monitoring period of March 2, 2009 through March 1, 2010.

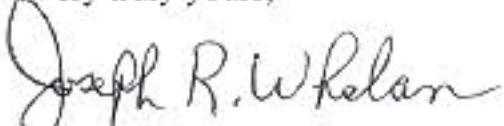
Although there were qualifying rain events during the monitoring period, there was only one discharge event at the facility. The discharge occurred on August 13, 2009, and could not be safely sampled because it occurred shortly after midnight and the conditions are not safe for collection of samples at night. The attached DMR form (EPA Form 3320-1) reflects the "No discharge" status of the site for the 2009-2010 monitoring period.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

From everyday collection to environmental protection, Think Green. Think Waste Management.

If you should have any questions or require additional information, please contact me at (808) 668-2985.

Very truly yours,



Joseph Whelan
General Manager
Waste Management of Hawaii

Enclosures: Discharge Monitoring Report

cc: Wayne Hamada – City and County of Honolulu
Justin Lottig – WMH
Tobias Kochler – AECOM Technical Services, Project Manager

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS: Wai'anae Facility
City and County of Honolulu
Department of Environmental Services, Refuse Division
1000 Uluana Street, Suite 212
Kapolei, Oahu 96707

ADDRESS	92-480 Farrington Highway Kapolei, Oahu 96707
FACILITY	Wai'anae Gulch Sanitary Landfill
LOCATION	WGLC-0001 No discharge this period
PERMIT NUMBER	HI RSGA593
DISCHARGE NUMBER	WOLF-D0801

2810 APR 28 1:20pm

Form Approved.

OMB No. 2040-0004

NOTE: Read instructions before completing this form.

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Biochemical Oxygen Demand	SAMPLE MEASUREMENT				No Discharge	mg/L	0	1/365	Composite
	PERMIT REQUIREMENT				Report			1/365	Composite
Chemical Oxygen Demand	SAMPLE MEASUREMENT				No Discharge	mg/L	0	1/365	Composite
	PERMIT REQUIREMENT				Report			1/365	Composite
Total Suspended Solids	SAMPLE MEASUREMENT				No Discharge	mg/L	0	1/365	Composite
	PERMIT REQUIREMENT				100			1/365	Composite
Total Phosphorus	SAMPLE MEASUREMENT				No Discharge	mg/L	0	1/365	Composite
	PERMIT REQUIREMENT				Report			1/365	Composite
Total Nitrogen	SAMPLE MEASUREMENT				No Discharge	mg/L	0	1/365	Composite
	PERMIT REQUIREMENT				Report			1/365	Composite
Nitrite + Nitrate Nitrogen	SAMPLE MEASUREMENT				No Discharge	mg/L	0	1/365	Composite
	PERMIT REQUIREMENT				Report			1/365	Composite
Total Kjeldahl Nitrogen	SAMPLE MEASUREMENT				No Discharge	mg/L	0	1/365	Composite
	PERMIT REQUIREMENT				Need result for calculation			1/365	Composite
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all submissions were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.								DATE
Joseph Whelan, General Manager/Vice President Waste Management of Hawaii, Inc.	 Signature of Principal Executive Officer or Authorized Agent								005 660-2395 2009 4 29
TYPED OR PRINTED									AREA CODE NUMBER YEAR MO DAY
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference any attachments here)									

NATIONAL POLLUTANT DISCHARGE MONITORING REPORT (NPDES)

Form Approved.

OMB No. 2040-0304

FERMITTEE NAME/ADDRESS (include Facility Name/Location if different)
NAME
 City and County of Honolulu
 Department of Environmental Services, Resource Division
 1000 Ululua Street 1, Suite 212
 Kapolei, Oahu 96707

PERMIT NUMBER	HI FGQAS533
DISCHARGE NUMBER	WSLF-D001

ADDRESS: 92-480 Wai'anae Highway
 Kapolei, Oahu 96707
FACILITY: Waianaeo Gulch Sanitary Landfill
LOCATION: WSLF-D001
 No discharge this period

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
09	03	02	10	03	01

NOTE: Read instructions before completing this form.

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Oil and Grease	SAMPLE MEASUREMENT				No Discharge	mg/L	0	11365	Grab
	PERMIT REQUIREMENT				15				
pH	SAMPLE MEASUREMENT				No Discharge	mg/L	0	11365	Grab
	PERMIT REQUIREMENT				7.6 - 8.6				
Flow	SAMPLE MEASUREMENT	No Discharge					0	11365	Composite
	PERMIT REQUIREMENT	No discharge limitation at this time.					11365	Composite	
Total Recoverable Iron	SAMPLE MEASUREMENT				No Discharge	mg/L	0	11365	Composite
	PERMIT REQUIREMENT				1.0				
Total Recoverable Zinc	SAMPLE MEASUREMENT				No Discharge	mg/L	0	11365	Composite
	PERMIT REQUIREMENT				0.022				
Ammonia	SAMPLE MEASUREMENT				No Discharge	mg/L	0	11365	Composite
	PERMIT REQUIREMENT				10				
Alpha Terpenol	SAMPLE MEASUREMENT				No Discharge	mg/L	0	11365	Composite
	PERMIT REQUIREMENT				0.033				
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER					Telephone		DATE		
Joseph Whelan, General Manager/Vice President Waste Management of Hawaii, Inc.					800	668-2205	2009	4	20
TYPED OR PRINTED					Signature of Principal Executive Officer or Authorized Agent	Area Code	Number	Year	Mo Day
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)									
<p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage this system, or those persons directly responsible for gathering the information, the information contained is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</p> 